FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000012250 (4)**

1. Corporation Name

FLAGSHIP TRAVEL CLUB, INC.

Principal Place of Business	Mailing Address
10800 BISCAYNE BLVD. SUITE 705 MIAMI FL 33161	10800 BISCAYNE BLVD. SUITE 705 MIAMI FL 33161

3. Date Incorporated or Qualified: 02/10/1994
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business — 21:
2a. Mailing Address — 26: 100 S.E. Second Street

Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27: Suite 4000

City & State — 23:
City & State — 28: Miami, FL

Zip — 24:
Country — 25:
Zip — 29: 33131
Country — 30: USA

4. FEI Number: ~~APPLIED FOR~~ 58-216-6571 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STEVEN M. MEYERS, P.A.
ONE BISCAYNE TOWER #3550
TWO S. BISCAYNE BLVD.
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: Robert E. Dady, Esq.
82 Street Address (P.O. Box Number is Not Acceptable): 100 S.E. Second Street
83
84 City: Miami — FL — 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Robert E. Dady, Esq. — 7/17/96
(Signature of New Registered Agent) (Date)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MEYERS, HILLEL A 4875 PINE TREE DR. MIAMI BEACH FL 33140	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D Milton, Phillip 230 Park Avenue, Suite 635 New York, New York 10169-0019	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KAYE, BRUCE 1534 NE QUAY TERRACE MIAMI FL 33138	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D Keith, Marvin 230 Park Avenue, Suite 635 New York, New York 10169-0019	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GOLDWYN, OWEN 60 NORTH MAINE AVE ATLANTIC CITY NJ 08401	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	VP/T Valenti, Michael 60 North Maine Street Atlantic City, New Jersey 08401	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	100001925281 -08/19/96--01013--025 ***225.00	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: — 7/17/96 (Date) — 348-9188 (Daytime Phone #)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Bruce Kaye